

## DLA-HROC OVERSEAS LOCAL APPLICANT QUESTIONNAIRE

PURPOSE: Used by civilian personnel specialist to make determinations regarding eligibility for employment with DOD and employment referral priorities.

ROUTINE USES: Records from this system of records may be disclosed for any of the blanket federal routine uses published by OPM, DOD or DLA. Furnishing information is voluntary. If you do not give the requested information, it may result in erroneous employment determinations and may be grounds for not employing you or dismissal after you begin work.

PRIVACY ACT provisions apply to information provided on this questionnaire IAW Title 5 of the United States Code, Executive Order 9397 (SSN) and other regulatory guidelines.

JOA Number \_\_\_\_\_ Requesting Preference? ☐ NO ☐ YES If YES, what type? \_\_\_\_\_

NAME (LAST, FIRST, MIDDLE INITIAL) \_\_\_\_\_ SSAN: \_\_\_\_\_

PLACE OF BIRTH (City, and State or Country) \_\_\_\_\_ DOB: \_\_\_\_\_

Current DEROS (Date of Estimated Return from Overseas), if applicable: \_\_\_\_\_ DEROS Beginning Date: \_\_\_\_\_

Will you need a Tour Extension if selected for this position? ☐ NO ☐ YES ☐ UNKNOWN

### SECTION A

1. STATUS AND REASON FOR BEING IN THE OVERSEAS AREA (Mark "X" and complete information where applicable)

- A. ☐ SPOUSE OF ACTIVE DUTY MILITARY MEMBER ASSIGNED TO: \_\_\_\_\_  
(Attach copy of sponsor's PCS orders, or agency documentation showing command sponsorship, and complete Section B)
- B. ☐ SPOUSE OF A DOD CIVILIAN EMPLOYEE ASSIGNED TO: \_\_\_\_\_  
(Attach copy of sponsor's orders and complete Section B)
- C. ☐ CHILD OF ACTIVE DUTY MILITARY OR DOD CIVILIAN EMPLOYEE  
(Attach copy of sponsor's PCS orders and complete Section B)
- D. ☐ FORMER MILITARY MEMBER (Includes those applying in anticipation of military separation. Complete Sections C and D)
- E. ☐ OTHER (Explain, e.g., tourist, student, employed by private company, off-duty military etc. For those employed by a private company or a dependent of a person employed by a private company be sure to include the name of the company. Complete Section D)

2. US CITIZEN BY ☐ BIRTH ☐ NATURALIZATION (Give original citizenship)

3. PASSPORT NUMBER \_\_\_\_\_

4. ARE YOU A CITIZEN OR DO YOU HAVE CLAIM TO CITIZENSHIP IN OTHER COUNTRIES? ☐ NO ☐ YES  
(IF YES, LIST COUNTRY AND IDENTIFY WHETHER OR NOT YOU HAVE PASSPORTS FROM THOSE COUNTRIES)

### SECTION B. TO BE COMPLETED BY SPOUSES AND CHILDREN OF MILITARY AND DOD CIVILIAN EMPLOYEES

SPONSOR'S NAME \_\_\_\_\_ SPONSOR'S ORGANIZATION \_\_\_\_\_

SPONSOR'S DUTY PHONE \_\_\_\_\_ SPONSOR'S DEROS \_\_\_\_\_

1. WERE YOU MARRIED TO YOUR SPOUSE PRIOR TO RECEIPT OF PCS ORDERS AND INCLUDED ON THE ORDERS? ☐ NO ☐ YES  
If yes, please go to next question, Or, if your answer was NO, please answer the following:

WERE YOU MARRIED TO YOUR SPONSOR AFTER HER/HIS PCS ASSIGNMENT? ☐ NO ☐ YES

WERE YOU RESIDING IN THE LOCAL AREA AT TIME OF YOUR MARRIAGE? ☐ NO ☐ YES

DID YOU RECEIVE COMMAND SPONSORSHIP? ☐ NO ☐ YES

DATE SPONSOR ARRIVED: \_\_\_\_\_

DATE YOU ARRIVED: \_\_\_\_\_

2. ARE YOU RESIDING WITH YOUR SPONSOR ☐ NO ☐ YES
3. ARE YOU WORKING OR HAVE YOU WORKED IN A PERMANENT NON-APPROPRIATED FUND OR AAFES POSITION?  
I.E. NCO CLUB, BX, PX, CHILD CARE FACILITY ETC? ☐ NO ☐ YES

4. ARE YOU CURRENTLY A TEMPORARY APPROPRIATED FUND EMPLOYEE? NO ☐ YES ☐  
IF YES THEN HOW LONG? \_\_\_\_YRS \_\_\_\_MOS APPT NTE Date? \_\_\_\_\_
5. ARE YOU CURRENTLY A PERMANENT APPROPRIATED FUND EMPLOYEE ON LEAVE WITHOUT PAY (LWOP)? IF SO, PROVIDE EMPLOYING AGENCY AND LOCATION AND A COPY OF SF50 GRANTING LWOP.
6. DO YOU HAVE CAREER/CAREER CONDITIONAL STATUS? ☐ NO ☐ YES  
WHAT WAS THE HIGHEST GRADE YOU HELD IN A PERMANENT APPROPRIATED FUND POSITION \_\_\_\_\_
7. HAVE YOU RECEIVED SPOUSE PREFERENCE AT ANY OTHER INSTALLATION WITHIN THE COMMUTING AREA OR DECLINED MILITARY SPOUSE PREFERENCE FOR A POSITION YOU HAVE INDICATED INTEREST?

**NOTE:** PLEASE ENSURE YOU ATTACH A COPY OF YOUR SPONSORS PCS ORDERS, AMENDMENTS OR VERIFICATION OF COMMAND SPONSORSHIP, AS APPLICABLE.

**SECTION C. TO BE COMPLETED BY FORMER MILITARY MEMBERS**

DATE OF SEPARATION: WAS/WILL BE \_\_\_\_\_ PLACE OF SEPARATION: WAS/WILL BE \_\_\_\_\_

REASON FOR SEPARATION WAS/WILL BE \_\_\_\_\_

MILITARY TRANSPORTATION ENTITLEMENT WAS USED \_\_\_\_ WILL BE USED \_\_\_\_ WILL NOT BE USED \_\_\_\_

**SECTION D. TO BE COMPLETED BY ALL THOSE WHO ARE NOT DEPENDENTS:**

DATE OF ORIGINAL ARRIVAL IN THIS OVERSEAS COUNTRY (Periods of travel outside the country for business, pleasure, etc, do not change this date)

DO YOU HAVE A PLACE OF RESIDENCE IN THE US? ☐ NO ☐ YES (Give full address)

DO YOU HAVE A LOCAL WORK PERMIT? ☐ NO ☐ YES

DO YOU HAVE EXPERIENCE WORKING ON THE LOCAL ECONOMY? ☐ NO ☐ YES

WERE YOUR HOUSEHOLD GOODS SHIPPED TO THE OVERSEAS AREA? ☐ THE US GOVERNMENT ☐ CURRENT EMPLOYER

☐ NO ☐ YES, THE SHIPMENT WAS PAID BY: ☐ MY FORMER EMPLOYER ☐ MYSELF

☐ OTHER (EXPLAIN) \_\_\_\_\_

I INTEND TO STAY IN THE OVERSEAS AREA (Regardless of whether or not I am employed by the Department of Defense)

☐ INDEFINITELY ☐ 3-5 YEARS ☐ 2-3 YEARS ☐ 6-12 MONTHS ☐ LESS THAN SIX MONTHS

DO YOU OR YOUR SPOUSE OWN PROPERTY IN THIS COUNTRY? ☐ NO ☐ YES

HAVE YOU PAID TAXES IMPOSED ON LOCAL RESIDENTS ☐ NO ☐ YES

IS YOUR INCOME SUBJECT TO LOCAL TAXES? ☐ NO ☐ YES

**SECTION E. REMARKS (Use this space if you need additional room to explain your answer)**

I certify that, to the best of my knowledge and belief, all of the information provided in this questionnaire is true, correct, complete and made in good faith. I understand that false or fraudulent information may be grounds for not hiring me or for firing me after I begin work, and may be punishable by fine or imprisonment.

APPLICANT'S PRINTED NAME

SIGNATURE

DATE (DD/MM/YY)